



**BUREAU OF CRIMINAL IDENTIFICATION AND INFORMATION**  
4949 BROADWAY  
P.O. BOX 903417  
SACRAMENTO, CA 94203-4170  
Public: (916) 227-3823

**APPLICANT SUBMITTING AGENCY REQUEST TO CHANGE:**

- ☐ Agency Name
- ☐ Agency Address
- ☐ Change Fax Number to Electronic SMSS for Applicant Responses
- ☐ Contact Person / Phone Number

**OLD INFORMATION**

Agency Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Response Fax Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**CURRENT (NEW) INFORMATION**

Agency Address: \_\_\_\_\_

Mail Code Number: \_\_\_\_\_

Contact Person / Phone #: \_\_\_\_\_

**REQUESTOR INFORMATION**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Mail or fax this form to:

**Department of Justice**  
**Applicant Processing Program**  
**P.O. Box 903417**  
**Sacramento, CA 94203-4170**

**Fax number: (916) 227-2000**

Agency Name: \_\_\_\_\_

AORI: \_\_\_\_\_ Mail Code: \_\_\_\_\_

Billing Number: \_\_\_\_\_

Your Projection for Monthly Submissions: \_\_\_\_\_

**FOR DOJ USE ONLY:**

- \_\_\_\_\_ Update Authorized Agency List
- \_\_\_\_\_ Update ORI Tables
- \_\_\_\_\_ Update RDU Mailing Labels
- \_\_\_\_\_ Notify Record Security
- \_\_\_\_\_ Notify Field Operations
- \_\_\_\_\_ Notify Accounting

Agency Name: \_\_\_\_\_